

Order Form for Alternate Format Practice Tests

Use this form to place an order for free alternate formats of the ACT[®] practice test. These materials may be checked out by students or used to simulate a practice session in school.

Instructions

1. Complete the form accurately and legibly to avoid processing delays. After all information has been entered, email the form to the address listed below.
2. Order according to the format(s) your students will require for the actual administration.
3. Indicate the quantity of each item you are ordering in the column to the left of the appropriate item.

Please consider your quantities carefully.

You may reuse these materials at your school until they are no longer in usable condition.

| Quantity | Item | Description | Identifier |
|----------|-------------------------------------|--|------------|
| | DVDs | Includes a regular type booklet and DVD Usage Guidelines. | 01116616KT |
| | Braille (with Raised Line Drawings) | Includes a regular type booklet. | 01117716PT |
| | Braille Writing Booklet | For braille users taking the ACT with writing. | 01117716W |
| | Raised Line Drawings | For use only by students requiring oral presentation. If you chose braille, do not mark this box. | 01117316PT |
| | Large Type Multiple-Choice Booklet | Includes a large type (18-pt.) answer document. | 01117516KT |
| | Large Type Writing Booklet | Large type (18-pt.) writing booklet | 01195816W |

A copy of *Preparing for the ACT[®] Test Special Testing* will be included with each set of items ordered. This publication provides the scoring keys and a writing test, which may be read verbatim to students. Those students who will test with a regular type test booklet should download *Preparing for the ACT[®] Test*, which also includes a writing test, from www.actstudent.org.

Ship to: (Type or print; all fields required unless stated otherwise.)

Name and Title (if applicable)

Institution Name (If applicable; if not, check box below.)
☐ I am ordering as an individual (e.g., as a parent), not for a school.

Address (Do not use PO Box number.)

City State ZIP

Telephone (Include area code and extension.)

ACT Customer Number (if known)

High School Code OR College Code (if applicable)

For questions related to tracking an order, please email ACT Customer Services.
For all other inquiries regarding testing students with disabilities please contact
ACT Test Accommodations at 319.337.1332.

Email your order to
customerservices@act.org